

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	OB	20200	8-5-99
O.I.P.E. CLASSIFIER			5/8/99
FORMALITY REVIEW	OS	59229	8/23/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	8/10/99
2	8/10/99
3	8/10/99
4	8/10/99
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8	8/10/99
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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